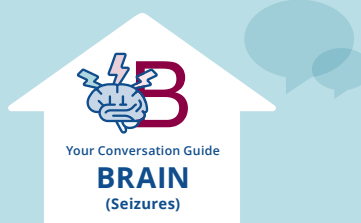






Be Prepared: Palliative Care Emergencies in the Home

A Tool for Patients and Caregivers



This tool helps you know the actions you can take and reassuring words to use if your loved one is experiencing a seizure. Your healthcare provider will review the actions with you.

Actions you can take	Comforting Words
Be aware It is important that you pay attention to what time the seizure starts and how long it lasts. See if you can remember if there was anything unusual before the seizure started. 	<i>"Did you notice anything unusual or different before you had the seizure?"</i>
Stay calm, ensure safety and comfort <ul style="list-style-type: none"> Place something soft under their head and loosen any clothing they may have around their neck. If you notice blood or vomit (from the nose or mouth), place the patient in the recovery position (turn the person on their side), if possible, so they don't choke 	<i>"I'm here with you. I will not be leaving."</i> <i>"I am turning you on your side to keep you safe."</i> <i>"I am going to make sure you are comfortable."</i>
Medications If prescribed, administer dosage (only if you were shown how to do so) 	<i>"This medication will help you. The nurse has shown me how to administer it."</i>
Observe The patient may sleep for awhile after a seizure. Keep observing the patient after the seizure in case another seizure occurs. 	<i>If the patient wakes up, ask how they are feeling:</i> <i>"Tell me how you feel now" or "Did you feel anything similar to what you felt last time before you had a seizure?"</i>

Do NOT restrain movement: Holding the person down or trying to stop their movements can cause injury. Instead, clear the area around them of any sharp or hard objects to prevent harm.

Do NOT put anything in their mouth: Placing something in a patient's mouth will cause damage to the teeth or jaw or cause other injury. There is no risk of swallowing their tongue. Don't try to get them to drink or swallow.

Do NOT attempt to move the person (unless in immediate danger): Only move them if they are in a dangerous location, like near fire or on a busy road. Otherwise, wait until the seizure is over to reposition or move them.

Do NOT block airway: Do not put them on their back. Instead, turn them on their side (recovery position) to keep their airway clear unless there's a spine or neck injury risk.

Do NOT leave them alone: Always stay with the person until the seizure is over and they regain full consciousness. After a seizure, there's often confusion, and the person may not know where they are or remember the seizure.

IF:

- ✓ you feel overwhelmed and need help.
- ✓ you feel your loved one is not feeling better after trying different strategies.
- ✓ you are worried about a brain seizure.
- ✓ you have questions about what to do.



**Call your
Healthcare
Team**

Day time: _____

Evening: _____

Night time: _____

5 things you should know about Seizures



1 What is a seizure?

A seizure occurs when there's sudden bursts of electrical activity in the brain. It can affect specific areas or larger portions of the brain. The type of seizure and the symptoms you might observe or experience depends on which area(s) of the brain is/are affected by this electrical burst.

2 What causes a seizure?

Seizures happen when there is abnormal brain electrical activity. They can start in a specific brain area or both sides of the brain at once.

Seizures can be caused by many different things and depend on a person's illness. Some common triggers are brain tumours, organ failure, metabolic or chemical imbalances, or medications.

3 What signs should I look for?

Seizures can show themselves in different ways. Here's what to look for:

- **Early warning signs:** A person might feel uneasy, experience unusual smells or tastes, or have sensations of déjà vu.
- **Sudden movements:** The individual may have jerky movements in one limb or part of the body, or the entire body might stiffen and then jerk rhythmically.
- **Staring and repetition:** The individual might stare blankly and might not respond to you. They could repeat certain actions, like lip-smacking or picking at clothes.
- **Loss of consciousness:** Some seizures can cause a person to blackout or lose consciousness, sometimes leading to a fall.
- **Brief blank spells:** These are short episodes where someone seems to 'zone out' for a few seconds. It may look like they're daydreaming, but they won't remember it.
- **After the Seizure:** Once the seizure ends, the person might feel confused, tired, or have a headache. They might not remember the seizure at all.

4 How can we treat a seizure?

The most important thing is to stay calm. Make sure the person is safe and as comfortable as possible. If the person is conscious, reassure them. Your healthcare team will set up a 'seizure rescue and response plan' to help you be prepared if a seizure happens.

5 When should I call the healthcare team?

Always know your healthcare team is available to support you. Some specific situations when you should urgently contact the healthcare team if a person has a seizure are:

- **First-time seizure:** If the person has never had a seizure before, it's crucial to seek medical evaluation to determine the cause and appropriate care.
- **Difficulty breathing:** After the seizure ends, if the person has trouble breathing or if their breathing doesn't return to normal.
- **Injury during seizure:** If the person sustained an injury during the seizure, such as a significant fall or bite, especially if it's a head injury.
- **No recovery post-seizure:** If the person does not start to wake up or return to their baseline level of consciousness after the seizure ends, or if they seem particularly ill or show signs of other significant complications.